

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	
Levitt et al.	
Serial No.: 09/939,209	
Filed: 8/24/01	

the specification filed herewith.

Atty. Docket No.: 00-539-US.1

METHODS AND SYSTEMS FOR FACILITATING THE DIAGNOSING AND TREATMENT OF SCHIZOPHRENIA

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled METHODS AND SYSTEMS FOR FACILITATING THE DIAGNOSING AND TREATMENT OF SCHIZOPHRENIA and described in

	Application Serial No. 09/939,209 filed August 24, 2001.
	Patent No. [No.], issued [Date].
independent inve	I have not assigned, granted, conveyed or licensed and am under no obligation under contract or ant, convey or license, any rights in the invention to any person who could not be classified as an enter under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not ill business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).
	Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or
am under an obli below.	igation under contract or law to assign, grant, convey, or license any rights in the invention is listed
	no such person, concern, or organization
	persons, concerns or organizations listed below*
*NOTE:	Separate verified statements are required from each named person, concern or organization
	having rights to the invention averring to their status as small entities (37 CFR 1 27)



Name:	University of Pittsburgh				
ADDRESS;	2000 Gardner Steel Conference Center, Thackery and O'Hara Streets, Pittsburgh, PA 152				
☐ INDIVIDUAL	. SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION				
NAME:					
ADDRESS:					
	. SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION				
Name:					
ADDRESS:					

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Pat Ressler Levitt

Date: 11 4/01

Venkata Chowdari Kodavali

Date: 12/09/01

Vishwajit Laxmikant Nimgaonkar Date: 12 /10/01

In re Application of:	
Levitt et al.	
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METHODS AND SYSTEMS FOR FACILITATING THE DIAGNOSING AND TREATMENT OF SCHIZOPHRENIA

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(d)) - Nonprofit Organization

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION:		University of Pittsburgh		
Address Of (Organization:	911 William Pitt Union, Pittsburgh, PA 15260		
	University Or Other Institution Of Higher Education			
	TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3))			
	Nonprofit Scie	NTIFIC OR EDUCATIONAL UNDER STATUTE OF		
	STATE OF THE UNITED STATES OF AMERICA			
	(NAME OF STATE:)			
	(CITATION OF ST	ATUTE:)		
	WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA			
		AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER TE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE DE AMERICA		
	(NAME OF STATE	:)		
	(CHAIION OF ST	ATUTE:)		

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled METHODS AND SYSTEMS FOR FACILITATING THE DIAGNOSING AND TREATMENT OF SCHIZOPHRENIA by inventors NAMES names described in the specification filed herewith Application Serial No. 09 939,209, filed August 24, 2001. Patent No. , issued I hereby declare that the rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27) NAME: Address: ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION Name: ADDRESS: ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION NAME: ADDRESS: [] INDIVIDUAL [] SMALL BUSINESS CONCERN [] NONPROFIL ORGANIZATION

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resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR

1.28(b))

Lacknowledge the duty to file, in this application or patent, notification of any change in status

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING:

Frances J. Connell, Esquire

TITLE IN ORGANIZATION:

Director, Office of Technology Transfer and Intellectual Property

ADDRESS OF PERSON SIGNING:

911 William Pitt Union, Pittsburgh, PA 15260

SIGNATURE frances JunilleDATE 10/25/01





Atty. Docket No. 00-539-US

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled METHODS AND SYSTEMS FOR FACILITATING THE DIAGNOSING AND TREATMENT OF SCHIZOPHRENIA, the specification of which

Regular Application

is attached hereto.					
was filed on August 24	, 2001 as Application S	Serial No. 09/939	209.		
	PCT Applica	ation Entering Na	ional Phase		
was filed on, as PCT I	International Application	n No.			
I hereby state that I have reviewed amended by any amendment referred	ed and understand the ed to above.	contents of the	above-identified specific	cation, including	the claims, as
I acknowledge the duty to disclose § 1.56(a).	information which is n	naterial to patenta	oility as defined in Title 3	7, Code of Feder	ral Regulations,
I hereby claim foreign priority ber inventor's certificate listed below a filing date before that of the applica-	nd have also identified	l below any forci	s, § 119(a) (d) of any for an application for patent	eign application(or inventor's cert	(s) for patent or ificate having a
Prior Foreign Application(s)				Priority C	<u>laimed</u>
1				Yes	☐ No
(Number) (Country)	(Day/N	Ionth/Year Filed)		
I hereby claim the benefit under Ti	itle 35, United States Co	ode. § 119(e) of a	ny United States provisio	nal application(s)) listed below.
60/288.021	August 24, 1999				
(Application Number)	(Filing Date)				
I hereby claim the benefit under T the subject matter of each of the provided by the first paragraph of defined in Title 37, Code of Feder the national or PCT international f	claims of this applicated Title 35, United States al Regulations, § 1.56	tion is not discloss SCode, § 112, I s which became av	sed in the prior United tacknowledge the duty to	disclose materia	in the manner in the information as
(Application Serial No.)	(Filing Date)		(Status-patented, pendir	ig, abandoned)	





Atty. Docket No.: 00-539-US

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Date: 1/ 29/01

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Inventor's Signature Full name of third inventor

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Inventor's Signature

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Date: 12/09/01

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Atty. Docket No.: 00-539-US

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